



PTO/SB/22 (10-08)

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APPLICATION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**FY 2009***(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)*

Docket Number (Optional)

SONYJP 3.3-344

Application Number

10/529,164-Conf. #4338

Filed

March 24, 2005

For DATA PROCESSING APPARATUS AND DATA RECEPTION PROCESSING APPARATUS

Art Unit

2135

Examiner

D. B. Schwartz

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

| | | Fee | Small Entity Fee | |
|-------------------------------------|----------------------------------|--------|------------------|-----------|
| <input checked="" type="checkbox"/> | One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ 130.00 |
| <input type="checkbox"/> | Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ |
| <input type="checkbox"/> | Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ |
| <input type="checkbox"/> | Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ |
| <input type="checkbox"/> | Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ |

☐ Applicant claims small entity status. See 37 CFR 1.27.☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director has already been authorized to charge fees in this application to a Deposit Account.☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 12-1095.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**I am the ☐ applicant/inventor.☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 34,930☐ attorney or agent under 37 CFR 1.34.

Registration number if acting under 37 CFR 1.34

Signature

October 9, 2008

Date

Dennis M. Smid, Esq.

Typed or printed name

(908) 518-6374

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

10/15/2008 CCHAU1 00000003 121095 10529164

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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: October 9, 2008

Signature: (Dennis M. Smid, Esq.)